

TOWN OF DAVIE

TOWN COUNCIL AGENDA REPORT

TO: Mayor and Councilmembers

FROM/PHONE: Bruce Taylor/954-327-3741

PREPARED BY: Heidi Cavicchia

SUBJECT: Resolution

AFFECTED DISTRICT: Townwide

ITEM REQUEST: **Schedule for Council Meeting**

TITLE OF AGENDA ITEM: BID - A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, ACCEPTING THE BID SUBMITTED BY SIEMENS WATER TECHNOLOGIES CORP. FOR A DISSOLVED SULFIDE REDUCTION AND ODOR CONTROL SYSTEM FOR THE UTILITIES DEPARTMENT. (\$81,950/year)

REPORT IN BRIEF: A competitive bid was conducted for a Dissolved Sulfide Reduction and Odor Control System to control hydrogen sulfide levels and protect the force mains within the Town's sanitary sewer system. The successful bidder is required to furnish all engineering, labor, equipment, materials and necessary chemicals to install, adjust, test, operate, and maintain a system for the control of dissolved sulfide within the Town's system.

The Town sent out bid specifications to eleven (11) prospective bidders. Two (2) vendors attended the mandatory site visits. The Town received one (1) response. The only bidder was Siemens Water Technologies Corp. at a bid price of \$81,950 per year.

PREVIOUS ACTIONS: Not Applicable

CONCURRENCES: The recommended award has been reviewed by the Utilities Director and the Bid Specification Committee who all concur with the decision to award to Siemens Water Technologies Corp.

FISCAL IMPACT: Yes

Has request been budgeted? Yes

If yes, expected cost: \$81,950 per year

Account Name: Water - Chemicals

RECOMMENDATION(S): Motion to approve the resolution

Attachment(s): Resolution, Procurement Authorization, Bid Opening Report, Bid Sheet, Utilities Department Recommendation, W-9 Form, Town of Davie Vendor/Bidder Disclosure Form, State of Florida Corporation Inquiry

RESOLUTION NO. _____

A RESOLUTION OF THE TOWN OF DAVIE, FLORIDA, ACCEPTING THE BID SUBMITTED BY SIEMENS WATER TECHNOLOGIES CORP. FOR A DISSOLVED SULFIDE REDUCTION AND ODOR CONTROL SYSTEM FOR THE UTILITIES DEPARTMENT

WHEREAS, the Town is in need of a dissolved sulfide reduction and odor control system in its' sanitary sewer system; and

WHEREAS, the Town solicited sealed bids for this project; and

WHEREAS, after review, the Town Council wishes to accept the bid from Siemens Water Technologies Corp.

NOW, THEREFORE, BE IT RESOLVED BY THE TOWN COUNCIL OF THE TOWN OF DAVIE, FLORIDA.

SECTION 1. The Town Council hereby accepts the bid from Siemens Water Technologies Corp. for a Dissolved Sulfide Reduction and Odor Control System in the amount of \$81,950 per year.

SECTION 2. The Town Council hereby authorizes the expenditure from the Utilities Department Water - Chemicals account.

SECTION 3. The initial contract period shall be for two (2) years with the option to renew for three (3) additional two (2) year periods. Extensions, if appropriate, will be presented to the Town Council for approval.

SECTION 4. This resolution shall take effect immediately upon its passage and adoption.

PASSED AND ADOPTED THIS _____ DAY OF _____, 2008.

MAYOR/COUNCILMEMBER

ATTEST:

TOWN CLERK

APPROVED THIS _____ DAY OF _____, 2008.

TOWN OF DAVIE
PROCUREMENT AUTHORIZATION

<u>ACCOUNT NUMBER</u> 040-1058-536-0630 <i>WATER CHEMICALS</i>	<u>BUDGET ITEM & DESCRIPTION</u> Dissolved Sulfide Reduction and Odor Control	<u>APPROXIMATE COST</u> \$60,000
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METHOD OF PROCUREMENT (check the one that applies)

☒ Open Competitive Bidding
☐ Piggyback on Contract Number _____
☐ Sole Source or Single Source
☐ Request For Proposals

SPECIFICATIONS & LIST OF VENDORS MUST BE ATTACHED

Signed *Brian Taylor*
Department Head

Have Funds been Reserved RES. 36908

Date 3/6/08 Signed *[Signature]*

Signed *Mary Shimmer*
Town Administrator

BIDS SUBMITTED

<u>VENDOR</u>	<u>COST</u>
<i>Siemens Water Technologies</i>	<i>\$81,950.00</i>

Signed *Will Co*
Procurement Manager

BID SPECIFICATION COMMITTEE'S RECOMMENDATION
Vendor _____ Cost _____

BID OPENING REPORT

BID NAME: Reduced Sulfide Production @ TIME: 2:03 PM
 BID NUMBER: 08-48 odor control system DATE: 4.10.08
 ESTIMATED COST: \$60,000.00

NO.	CONTRACTOR'S NAME	BID AMOUNT	COMMERCIAL RANKING
1.	<u>Siemens Water Tech</u>	<u>\$81,950.00</u>	<u>1</u>
2.			
3.			
4.			
5.			
6.			
7.			
8.			
9.			
10.			

REMARKS

NOTE: THE ABOVE BID AMOUNTS HAVE NOT BEEN CHECKED, AND BID TOTALS ARE SUBJECT TO CORRECTION AFTER THE BIDS HAVE BEEN COMPLETELY REVIEWED.

THIS IS ONLY A FINANCIAL RANKING OF ALL THE BIDS RECEIVED. THE USING DEPARTMENT IS RESPONSIBLE FOR REVIEWING THE BIDS FOR COMPLIANCE WITH ALL THE BID SPECIFICATIONS PRIOR TO SUBMITTAL OF LETTER OF RECOMMENDATION.

PURCHASING OFFICIAL: Chigela Salinas
 WITNESS: E. Blanton

DATE: 4.10.08
 DATE: 4.10.08

Bid Specifications
Dissolved Sulfide Reduction and Odor Control
Bid # 08-48

BID PRICE SHEET

Bidder's Name: SIEMENS WATER TECHNOLOGIES CORP.

Identify chemical proposed to be used to control dissolved sulfide on the Town's system:
ODOFREE™

State the annual amount of the proposed chemical required to meet the ALDS.
Quantities are for bid evaluation only.

55,000 gallons

(Provide documentation verifying the above stated chemical requirement recommendation with your bid.)

Unit cost bid per unit of Ferrous/Ferric Sulfate solution, or approved equal, dosed:

\$ 1.49 per gallon *

TOTAL ESTIMATED ANNUAL COST TO TOWN

Ferrous/Ferric Sulfate solution, or approved
equal, require to meet the ALDS)

55,000 ~~55,000~~ gals / yr

NOTE-This amount is used for bid evaluation purposes only

Unit cost of product

X \$ 1.49 /gal

TOTAL ESTIMATED COST

= \$ 81,950.00

Bidder's Name: SIEMENS WATER TECHNOLOGIES CORP.

Company Name: SIEMENS WATER TECHNOLOGIES CORP.

Signature: 

Print Name: DOUG DAVIS

Address: 2650 TALLEVAST ROAD

City: SARASOTA State: FLORIDA Zip: 34243

Phone: 941-355-2971 Fax: 941-351-4756 Date: 4/8/08

Will the Contractor accept the Town of Davie VISA Credit Card, Yes XX No



Administration 797-1030
Budget & Finance 797-1050
Development Services 797-1111
Engineering 797-1113
Fire Department 797-1090
Human Resources 797-1010

Parks & Recreation 797-1145
Police Department 693-8200
Public Works 797-1240
Town Clerk's Office 797-1023
Utilities 327-3742

TOWN OF DAVIE UTILITIES 6591 Orange Drive, Davie, Florida 33314-3399 (954) 327-3742

MEMORANDUM

TO: Herb Hyman, Procurement Manager

FROM: Bruce Taylor, Utilities Director *BT*

DATE: April 14, 2008

RE: Bid Recommendation – Dissolved Sulfide Reduction and Odor Control System

The Utilities Department would like to recommend accepting the bid from Siemens Water Technologies Corp. for the Dissolved Sulfide Reduction and Odor Control System. Siemens was the only bidder for this item at a cost of \$81,950 per year.

If you need additional information, please contact me.

:hkc

**Request for Taxpayer
Identification Number and Certification**

Give form to the
requester. Do not
send to the IRS.

Print or type
See specific instructions on page 2.

Name (as shown on your income tax return) SIEMENS WATER TECHNOLOGIES. CORP.	
Business name, if different from above	
Check appropriate box: <input type="checkbox"/> Individual/ Sole proprietor <input checked="" type="checkbox"/> Corporation <input type="checkbox"/> Partnership <input type="checkbox"/> Other ▶	
<input type="checkbox"/> Exempt from backup withholding	
Address (number, street, and apt. or suite no.) 2650 TALLEVAST ROAD	
City, state, and ZIP code SARASOTA, FL 34243	
List account number(s) here (optional)	

Part I Taxpayer Identification Number (TIN)

Enter your TIN in the appropriate box. The TIN provided must match the name given on Line 1 to avoid backup withholding. For individuals, this is your social security number (SSN). However, for a resident alien, sole proprietor, or disregarded entity, see the Part I instructions on page 3. For other entities, it is your employer identification number (EIN). If you do not have a number, see *How to get a TIN* on page 3.

Note. If the account is in more than one name, see the chart on page 4 for guidelines on whose number to enter.

Social security number								
OR								
Employer identification number								
0	4	3	0	6	3	9	0	1

Part II Certification

Under penalties of perjury, I certify that:

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me), and
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding, and
- I am a U.S. person (including a U.S. resident alien).

Certification instructions. You must cross out item 2 above if you have been notified by the IRS that you are currently subject to backup withholding because you have failed to report all interest and dividends on your tax return. For real estate transactions, item 2 does not apply. For mortgage interest paid, acquisition or abandonment of secured property, cancellation of debt, contributions to an individual retirement arrangement (IRA), and generally, payments other than interest and dividends, you are not required to sign the Certification, but you must provide your correct TIN. (See the instructions on page 4.)

Sign Here	Signature of U.S. person ▶ <i>A. Wayne Cordy</i>	Date ▶ <i>9-1-06</i>
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Purpose of Form

A person who is required to file an information return with the IRS, must obtain your correct taxpayer identification number (TIN) to report, for example, income paid to you, real estate transactions, mortgage interest you paid, acquisition or abandonment of secured property, cancellation of debt, or contributions you made to an IRA.

U.S. person. Use Form W-9 only if you are a U.S. person (including a resident alien), to provide your correct TIN to the person requesting it (the requester) and, when applicable, to:

- Certify that the TIN you are giving is correct (or you are waiting for a number to be issued),
- Certify that you are not subject to backup withholding, or
- Claim exemption from backup withholding if you are a U.S. exempt payee.

Note. If a requester gives you a form other than Form W-9 to request your TIN, you must use the requester's form if it is substantially similar to this Form W-9.

For federal tax purposes you are considered a person if you are:

- An individual who is a citizen or resident of the United States,
- A partnership, corporation, company, or association created or organized in the United States or under the laws of the United States, or

• Any estate (other than a foreign estate) or trust. See Regulations sections 301.7701-6(a) and 7(a) for additional information.

Foreign person. If you are a foreign person, do not use Form W-9. Instead, use the appropriate Form W-8 (see Publication 515, *Withholding of Tax on Nonresident Aliens and Foreign Entities*).

Nonresident alien who becomes a resident alien. Generally, only a nonresident alien individual may use the terms of a tax treaty to reduce or eliminate U.S. tax on certain types of income. However, most tax treaties contain a provision known as a "saving clause." Exceptions specified in the saving clause may permit an exemption from tax to continue for certain types of income even after the recipient has otherwise become a U.S. resident alien for tax purposes.

If you are a U.S. resident alien who is relying on an exception contained in the saving clause of a tax treaty to claim an exemption from U.S. tax on certain types of income, you must attach a statement to Form W-9 that specifies the following five items:

- The treaty country. Generally, this must be the same treaty under which you claimed exemption from tax as a nonresident alien.
- The treaty article addressing the income.
- The article number (or location) in the tax treaty that contains the saving clause and its exceptions.

I, DOUG DAVIS, being first duly sworn state that:
The full legal name and business address of the person(s) or entity contracting with the
Town of Davie ("Town") are as follows (Post Office addresses are not acceptable):

Name of Individual, Firm, or Organization: SIEMENS WATER TECHNOLOGIES CORP.
Address: 2650 TALLEVAST ROAD
SARASOTA, FL 34243
FEIN 04-3063901
State and date of incorporation 9/19/89 MA

OWNERSHIP DISCLOSURE AFFIDAVIT

1. If the contract or business transaction is with a corporation, the full legal name and business address shall be provided for each officer and director and each stockholder who directly or indirectly holds five percent (5%) or more of the corporation's stock. If the contract or business transaction is with a trust, the full name and address shall be provided for each trustee and each beneficiary. All such names and address are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address	Ownership
<u>NONE</u>		<u>%</u>
		<u>%</u>
		<u>%</u>
		<u>%</u>

2. The full legal names and business addresses of any other individual (other than subcontractors, materialmen, suppliers, laborers, and lenders) who have, or will have, any legal, equitable, or beneficial interest in the contract or business transaction with the Town are as follows (Post Office addresses are not acceptable):

Full Legal Name	Address
<u>NONE</u>	

By: Doug Davis
Signature of Affiant

Date: 4/8/08

DOUG DAVIS
Print Name

SUBSCRIBED AND SWORN TO or affirmed before me this 8 day of
APRIL 2008 by DOUG DAVIS, he/she is
PERSONALLY KNOWN 25